PTO/SR/122 (04-05)

Approved for use through 07/31/2006, OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

10/725.792

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number

December 2, 2003 CORRESPONDENCE ADDRESS Filing Date Application Marach First Named Inventor 3728 Art Unit Address to: Commissioner for Patents lerrold D. Johnson Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450 RPS920030236US1-LEN106220 Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: The address associated with ◩ Customer Number: 53493 OR Firm or Individual Name Address City State Zip Country Telephone Email

data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

Applicant/Inventor

Assignee of record of the entire interest.

CHANGE OF

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

Attorney or agent of record. Registration Number 51,606

This form cannot be used to change the data associated with a Customer Number. To change the

Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

0 + 12 0 1 7/2

Signature Typed or Printed

Name ANTHONY M. DEL ZOPPO, III

Telephone (440) 391-5100

Date (449) 391-3100

NOTE: Signatures of all the inventiors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of <u>ONE</u> forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is the family by the USPTO to procease) an application. Confidentiality is governed by \$3 U.S.C. 122 and \$3 CFR 1.11 and 1.14. This collection is estimated to base 3 microst to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or upogestions for method gives burst, and outside sent to the Chile Information Child. No. Petent and Trademant Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, V.A. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O., Box 1450, Alexandria, V.A. 22313-1450.